# Anderson House Office Building Mackinac Room Scheduling Form

The cost for use of the Mackinac Room is \$500 per day (regardless of the amount of time the room is scheduled). A \$250 non-refundable deposit is required when the paperwork is submitted. The remainder of the payment must be received at least two weeks before the scheduled event or the room may be made available for other use. A check or money order should be made payable to the "Michigan House of Representatives."

Please complete this form and submit the \$250 deposit to:
 House Business Office
 10<sup>th</sup> Floor, House Office Building
 124 N. Capitol Avenue
 P.O. Box 30014
 Lansing, MI 48909-7514

PLEASE PROVIDE THE FOLLOWING INFORMATION				
Name of event:				
Expected attendance (Maxim	num capacity of the i	room is 150 perso	ns):	
Name of sponsoring Represe	entative:			
Description of event:				
EVENT INFORMATION				
Month:	Day:		Year:	
Start time (Please select fro	m AM or PM):	AM	PM	
End time (Please select from Please note: The room is		AM the hours of 8:0	PM <b>DO AM and 5:00 PM</b>	۸.
Contact person:		Association	n name:	
Office location:		Telephone n	iumber:	
Fax number:				
Name of back-up person:				
	S	IGNATURE		
I have read, understood, an Anderson House Office Build		rocedures governi	ing the use of the M	lackinac Room in the
I understand that the spons responsible for any missing restore or pay to have resto its use. Any costs incurred indemnify and hold harmles incurred arising out of the sp	items that were us red the area used fo d will be deducted s the State of Michigonsor's use of the A	ed in conjunction r the event or exh from a Member' gan and the House anderson House Of	with the event. The hibit to the condition is allotment accour e of Representatives fice Building or its g	e sponsor will either that existed prior to nt. The sponsor will s for damage or loss prounds.
Sponsoring Representative: Date:				
Name (printed):				

#### **FOOD AND BEVERAGES**

<u>Please note</u>: Either the sponsor or the caterer must have a person(s) present to serve the food and stay at the event until the food service is completed, the trash is removed and the room has been cleaned.

Will beverages and/or food	I be served?			
Yes	No			
If yes, please give details that apply to caterers and		ved (See the attached Food heir own meals):	& Beverage Instruc	tions Form
Setup time (Please enter t	he time and then sele	ect from AM or PM):	AM	PM
Please provide the following	g information:			
Catering company:				
Caterer address:				
Contact person:				
Telephone number:				
Fax number:				
Is a copy of the food licens	se enclosed?			
Yes	No			

#### **EQUIPMENT**

Facilities Director before the day of the event.

If you answered "No", a copy of the food license must be submitted to the

<u>Please note</u>: The rearrangement of equipment (tables, chairs, podiums, etc.) in the Mackinac Room is strictly prohibited. All rooms must be left the same way they were found.

Do you desire any equipment for your event?

Yes	No		
If yes	s, indicate equipment desired Screen	I from the following list: TV/VCR/DVD player	Podium and microphone
	Internet access	Easel(s), Qty:	Extra microphone
	LCD projector	Paper for easels	Lapel microphone
	Laptop	Extension cord(s), Qty:	Registration table(s), Qty:
	Overhead projector		

# Anderson House Office Building

# Food & Beverage Instructions Form

Please complete this form and submit to:
 House Business Office
 10<sup>th</sup> Floor, House Office Building
 124 N. Capitol Avenue
 P.O. Box 30014
 Lansing, MI 48909-7514

#### **CATERERS & FOOD**

Caterers must provide a copy of their food license as required by state law (P.A. 368 of 1978), or a statement from the Health Department that the food or beverage you plan to serve is a non-potentially hazardous food for which a license is not needed. To request a temporary food license, contact the Ingham County Health Department at (517) 887-4312.

#### CHECK-IN UPON ARRIVAL

Upon arriving at the Anderson House Office Building (AHOB), caterers (sponsors) must check in at the Visitor Assistance desk which is located on the 1st Floor, South Tower. Caterers should bring all items in through the North Tower elevators.

#### **PARKING**

Caterers may park in the service area north of the AHOB, off Ottawa Street, to unload and load, but must remove their vehicles from the area immediately after unloading and before setting up for the event. Caterers' staff must obtain their own parking off-site. See General Information in the AHOB Planner for parking lot availability.

## **CARTS**

Caterers are responsible for providing their own carts for transporting items from their vehicles to the building and event site. The 1st floor entrance is equipped with an automatic door, which is activated by a push plate. Automatic door openers are to be used to open doors for carts. At no time are carts to be rammed into doors to force them open, or to hold them open.

#### **SAFETY**

Any equipment brought into the AHOB must be installed and operated in a safe manner.

## SURFACES, LINENS, TABLE SERVICE

Caterers are responsible for providing their own serving tables, linen cloths, serving dishes, table service, flatware, etc., and its removal immediately following the event. All surfaces being used for the event, including dining tables (six foot round), display tables, and credenzas must be covered with tablecloths. Caterers may not set, lean, or place any trays, serving stands, boxes, carts, etc. against or touching any walls or wood surfaces. Caterers must place drip trays under drink containers either on the table or the carpet to protect the surface.

Any beverage or food spill accidents are to be reported immediately to Facility Operations at (517) 373-9000

#### **TABLES & CHAIRS**

Any rearranging of tables and chairs in the AHOB is strictly prohibited.

#### TRASH REMOVAL & CLEANING

It is the responsibility of the caterer and the caterers' staff to thoroughly clean any area used immediately following the event. NO EXCEPTIONS. This includes, but is not limited to, the following:

- All napkins, trash, food particles, cans, bottles, etc. must be removed and properly disposed of from the tables, countertops, floors and carpeted areas.
- All trash must be bagged and left in the kitchen/pantry area.
- ◆ All equipment and/or any other items brought into the event site must be removed.
- All tables, countertops and any other surfaces must be wiped down with clear water and dried thoroughly.

The caterers are not responsible for any carpet vacuuming or floor mopping.

### All rooms must be left the same way they were found.

Please do not write below this line.

**Facilities Personnel Section** 

House Facility Staff Signature: \_\_

It is the discretion of the Facilities Director to determine whether these tasks have been properly completed. The sponsor of the event will be charged all costs required to repair surfaces and equipment damaged by the caterers or their staff. If additional cleaning is deemed necessary, it will be charged to the sponsor of the event at an hourly overtime rate. Abuse of the previously mentioned policies will result in the suspension of future facility use.

PLEAS	SE PROVIDE THE FOLLOWING INF	FORMATION			
Catering company:					
Owner:					
Month:	Day:	Year:			
I have read and agree to all aforementioned materials.					
Signature of owner or staff:					
Please return completed form to:					
House Business Office					
	10 <sup>th</sup> Floor, House Office Buildi	ing			
124 N. Capitol Avenue P.O. Box 30014					
	Lansing, MI 48909-7514				
For questions or concerns, please call (517) 373-6339.					